

| Copy B—To Be Filed With Employee's FEDERAL Tax Return. | | OMB No. 1545-0008 | |
|---|---|---|---------|
| a Employee's soc. sec. no. 197-08-4099 | 1 Wages, tips, other comp. 133868.68 | 2 Federal income tax withheld 14185.66 | |
| b Employer ID number (EIN) 39-1263473 | 3 Social security wages 142854.40 | 4 Social security tax withheld 8856.97 | |
| | 5 Medicare wages and tips 142854.40 | 6 Medicare tax withheld 2071.39 | |
| c Employer's name, address, and ZIP code Humana Insurance Company 500 West Main Street Louisville, KY 40202 | | | |
| d Control number | | | |
| e Employee's name, address, and ZIP code Rajasekhar Maddineni 17320 Deer Crossing Trail Louisville, KY 40023 | | | |
| 7 Social security tips | 8 Allocated tips | 9 | |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a Code See inst. for box 12 C 241.98 | |
| 13 Statutory employee | 14 Other | 12b Code D 8985.72 | |
| Retirement plan X | | 12c Code DD 27452.66 | |
| Third-party sick pay | | 12d Code | |
| KY 149415 | | 133868.68 | 5890.05 |
| 15 State Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax | |
| 18 Local wages, tips, etc. 150037.72 150037.72 | 19 Local income tax 1125.22 2175.48 | 20 Locality name JEFCO LSVL | |

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service.

| Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return | | OMB No. 1545-0008 | |
|---|---|---|---------|
| a Employee's soc. sec. no. 197-08-4099 | 1 Wages, tips, other comp. 133868.68 | 2 Federal income tax withheld 14185.66 | |
| b Employer ID number (EIN) 39-1263473 | 3 Social security wages 142854.40 | 4 Social security tax withheld 8856.97 | |
| | 5 Medicare wages and tips 142854.40 | 6 Medicare tax withheld 2071.39 | |
| c Employer's name, address, and ZIP code Humana Insurance Company 500 West Main Street Louisville, KY 40202 | | | |
| d Control number | | | |
| e Employee's name, address, and ZIP code Rajasekhar Maddineni 17320 Deer Crossing Trail Louisville, KY 40023 | | | |
| 7 Social security tips | 8 Allocated tips | 9 | |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a Code C 241.98 | |
| 13 Statutory employee | 14 Other | 12b Code D 8985.72 | |
| Retirement plan X | | 12c Code DD 27452.66 | |
| Third-party sick pay | | 12d Code | |
| KY 149415 | | 133868.68 | 5890.05 |
| 15 State Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax | |
| 18 Local wages, tips, etc. 150037.72 150037.72 | 19 Local income tax 1125.22 2175.48 | 20 Locality name JEFCO LSVL | |

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS

| Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.) | | OMB No. 1545-0008 | |
|---|---|---|---------|
| a Employee's soc. sec. no. 197-08-4099 | 1 Wages, tips, other comp. 133868.68 | 2 Federal income tax withheld 14185.66 | |
| b Employer ID number (EIN) 39-1263473 | 3 Social security wages 142854.40 | 4 Social security tax withheld 8856.97 | |
| | 5 Medicare wages and tips 142854.40 | 6 Medicare tax withheld 2071.39 | |
| c Employer's name, address, and ZIP code Humana Insurance Company 500 West Main Street Louisville, KY 40202 | | | |
| d Control number | | | |
| e Employee's name, address, and ZIP code Rajasekhar Maddineni 17320 Deer Crossing Trail Louisville, KY 40023 | | | |
| 7 Social security tips | 8 Allocated tips | 9 | |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a Code See inst. for box 12 C 241.98 | |
| 13 Statutory employee | 14 Other | 12b Code D 8985.72 | |
| Retirement plan X | | 12c Code DD 27452.66 | |
| Third-party sick pay | | 12d Code | |
| KY 149415 | | 133868.68 | 5890.05 |
| 15 State Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax | |
| 18 Local wages, tips, etc. 150037.72 150037.72 | 19 Local income tax 1125.22 2175.48 | 20 Locality name JEFCO LSVL | |

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS
This information is being furnished to the IRS. If you are required to file a tax return, a negligence

| Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return | | OMB No. 1545-0008 | |
|---|---|---|---------|
| a Employee's soc. sec. no. 197-08-4099 | 1 Wages, tips, other comp. 133868.68 | 2 Federal income tax withheld 14185.66 | |
| b Employer ID number (EIN) 39-1263473 | 3 Social security wages 142854.40 | 4 Social security tax withheld 8856.97 | |
| | 5 Medicare wages and tips 142854.40 | 6 Medicare tax withheld 2071.39 | |
| c Employer's name, address, and ZIP code Humana Insurance Company 500 West Main Street Louisville, KY 40202 | | | |
| d Control number | | | |
| e Employee's name, address, and ZIP code Rajasekhar Maddineni 17320 Deer Crossing Trail Louisville, KY 40023 | | | |
| 7 Social security tips | 8 Allocated tips | 9 | |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a Code C 241.98 | |
| 13 Statutory employee | 14 Other | 12b Code D 8985.72 | |
| Retirement plan X | | 12c Code DD 27452.66 | |
| Third-party sick pay | | 12d Code | |
| KY 149415 | | 133868.68 | 5890.05 |
| 15 State Employer's state ID number | 16 State wages, tips, etc. | 17 State income tax | |
| 18 Local wages, tips, etc. 150037.72 150037.72 | 19 Local income tax 1125.22 2175.48 | 20 Locality name JEFCO LSVL | |

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS
BW24UP NTF 2585808 3 BW24UP